PTO/SB/17 (10-08)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it destructs a unit of the commence of the collection.

FEE TRANSMITTAL For FY 2009  Applicant claims small entity status. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT  (S) 490.00  Attority Deposit Account Deposit Account Number  Occurrence of Control (Check all that apply)  Check Credit Card Money Order  Deposit Account Deposit Account Deposit Account Number  Occurrence of Credit Card  Money Order  Deposit Account Deposit	Under the Paperwork Reduct	ion Act of 19	ย่อ, no person are re	respond to a collection of information unless it displays a valid OMB control number Complete if Known						
FEE TRANSMITTAL For FY 2009    Applicant claims small entity status. See 37 CFR 1.27   Art Unit   1793					10/270 014 0 \$ 44005					
FOR FY 2009    Soli PELTONEN   Examiner Name   Chan, Heng M.							***************************************			
Applicant claims small entity status. See 37 CFR 1.27  Art Unit 1793  At Credit any overpayments been been been by unit 1793  At Credit any overpayments  Fee Spald (\$)  EXAMINATION FEES  Small Entity  Fee Spald (\$)  EXAMINATION FEES  Small Entity  Fee Spald (\$)  Examiner Mane Birch, Research 1795  Fee Spald (\$)  At Unit 1793  At Unit 17							**********	*******************************		
Applicant claims amail entity status. See 37 CPR 1.27	For FY 2009						***************************************	·····		
METHOD OF PAYMENT (check all that apply)	Applicant claims small entity status. See 37 CFR 1 27									
Check					740 074			····		
Check Credit Card Money Order None Other (please idantity)    Deposit Account Deposit Account Number   Q2-2448   Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP	TOTAL AMOUNT OF PAYMENT (\$) 490.00				Attorney Docket No. U365-0670PUS1					
Deposit Account   Deposit Account Number   D2-2448   Deposit Account Name   Birch, Stewart, Kolasch & Birch, LLP	METHOD OF PAYMENT (check all that apply)									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    X   Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filling fee   X   Charge fee(s) indicated below, except for the filling fee   X   Charge fee(s) indicated below, except for the filling fee   X   Charge fee(s) indicated below, except for the filling fee   X   Charge fee(s) indicated below, except for the filling fee   X   Credit any overpayments	Check Credit Card Money Order None Other (please identity):									
Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filling fee   X   Charge any additional fee(s) or underpayments of   X   Credit any overpayments	x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP									
See	For the above-identifi	ied deposit	account, the Di	rector is	hereby authorize	d to: (chec	k all that apply)			
Residence	x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Application Type	Charge any additional fee(s) or underpayments of X Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17									
Part	FEE CALCULATION									
Papilication Type	1. BASIC FILING, SEARCH,	AND EXA	MINATION FEE	S						
Application Type		FILIN		SE		EXAMIN				
Design   220   110   100   50   140   70	Application Type	Fee (\$)		Fee (\$		Fee (\$)		Fees	Paid (\$)	
Plant   220   110   100   50   140   70	1									
Plant	{ *	220	110	100	50	140	70	***************************************	*******	
Provisional	{ · · · ·						85			
Provisional   220   110   0   0   0   0   0							325			
EXCESS CLAIM FEES  Beach claim over 20 (including Reissues)  Cach independent claim over 3 (including Reissues)  Clack independent claims  Total Claims  Say 195  Fee (\$) Fee Paid (\$)  Fee (\$) Fee Paid (\$)  Fee (\$) Fee Paid (\$)  Say 195  Fee (\$) Fee Paid (\$)  Say 195  Fee Paid (\$)  Fee Pa								~~~~		
Fee Description  Cach claim over 20 (including Reissues)  Cach independent claim over 3 (including Reissues)  Cach independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Extra Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  HP = highest number of independent claims paid for, if greater than 3.  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Augustic Part of the part of independent claims paid for if greater than 3.  COTHER FEE(\$)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filling surcharge): 1252 Extension for response within second month  Ago Other (e.g., late filling surcharge): 1252 Extension for response within second month		~~					•		Small Entity	
Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Hultiple Dependent Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$2.70 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Cother FEE(S)  Non-English Specification. \$130 fee (no small entity discount)  Other (e.g., late filling surcharge): 1252 Extension for response within second month  490.00	Fee (\$) Fee (\$)									
Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  Total Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Supplication so the part of independent claims paid for, if greater than 3.  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof. Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1252 Extension for response within second month  490.00					52	26				
Total Claims    Substitute   Fee   Substitute   Substitute   Fee   Sub	Each independent claim over				220	110				
HP = highest number of total claims paid for, if greater than 20.  Indep. Claims	Multiple dependent claims							390	195	
HP = highest number of total claims paid for, if greater than 20.    Indep. Claims		a Claims	Fee (\$)	F	e Paid (\$)	Mi	ultiple Depende	nt Claims	<u>s</u>	
Indep. Claims  3 -3 or HP  x =  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$) Fee Paid (\$)  -100 = /50 = (round up to a whole number) x = (round up to a whole number) x = (round up to a whole number)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1252 Extension for response within second month 490.00	33 -33 or HP		≈			<u>Fee</u>	<u>(\$)</u> E	ee Paid (	<u>\$)</u>	
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listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  - 100 = /50 = (round up to a whole number) x = (*)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1252 Extension for response within second month 490.00										
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Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month 490.00			***************************************					Fee	Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1252 Extension for response within second month 490.00  SUBMITTED BY										
Other (e.g., late filing surcharge): 1252 Extension for response within second month 490.00	4. OTHER FEE(S)				S			Fees	Paid (\$)	
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	SUBMITTED BY						<del></del>			
ignature Registration No. 28,977 Telephone (703) 205-8000	Signature		16/1.50/		Registration No. (Attorney/Agent)	28,977	Telephone	(703) 20	5-8000	
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